Please type a plus sign (+) inside this box	U.S. Patent and Trademark	PTO/SB/05 (0 for use through 10/31/2002 OMB 0651- Office; U.S. DEPARTMENT OF COMME unless it displays a valid OMB control nu	-0032 ERCE
UTILITY	Attorney Docket No.	117-001	

## PATENT APPLICATION **TRANSMITTAL**

Elkan First Inventor Method and System for Selecting

(Only for new nonprovisio	nal applications under 37 CFR 1.53(b))	Expre	Express Mail Label No. ET544827743US							
	ATION ELEMENTS		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, P.O. 2004							
1.	[Total Pages 24]  If set forth below)  of the invention be to Related Applications arding Fed sponsored R & D equence listing, a table, program listing appendix the Invention of the Invention on of the Drawings (if filed)	7. [ 8. N (/ a. b.	ADDRESS TO: Box Patent Application Washington, DC 20231  7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or i i. paper c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s)) 10. (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)/PTO-1449  Copies of IDS Citations							
i. DELET Signed sta named in 1 63(d)(2)	ION OF INVENTOR(S) attement attached deleting inventor(s) the prior application, see 37 CFR and 1.33(b). Sheet. See 37 CFR 1.76	15. 16.	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)							
17. If a CONTINUING APPLIOR in an Application Data She Continuation Prior application information:  For CONTINUATION OR DIVIS Box 5b, is considered a part of	CATION, check appropriate box, and su	the prior ap	of prior application No.: Group / Art Unit plication, from which a livisional application a	6 ( in oath o	or declaration	246,630				
The most perduent <u>outroins</u> so	18. CORRESPON	······································		а аррио	ation parts.					
Customer Number or Bar Code Label  (Insert Customer No. or Attach bar code label here)  Correspondence address below										
Name	Jennifer Meredith									
	2565 Broadway #413									
Address		1	T	<u>-</u>		10005				
City			State NY		Zip Code					
Country	USA 7	elephone	212-662-10	22	Fax	801-365-9234				
Name (Print/Type)	Jennifer Meredith	1	egistration No. (Atto	Ť	<u> </u>	47,790				
Signature	len Wedl	h		l E	Date //	1/2001				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.											
PATENT APPLICATION FEE DETERMINATION RECOR						D Application or Docket Number					
					117-001						
	·	CLAIMS	S AS FILED -			SM	ALL I	ENTITY	OR	OTHER T	
707	(Column 1) (Column 2)		SWALL ENTIT				SMALL E	`			
FOR		NUMB	ER FILED	NUMBER	EXTRA	R.A	ATE	FEE		RATE	FEE
BASIC FEE			77	- 227							
(37 CFR 1.16(a))				\$ <u>370</u>	OR	Market Market Market Market	\$				
(37 CFR 1.16(c)) 3 0 minus 20 = 1 0			9_=	90	OR	x \$=					
INDEPENDENT CLAIMS 5 minus 3 = * 2		x 4	<u>Z</u> =	84	OR	x=					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+	=		OR	+=			
* If the difference in column 1 is less then zero, enter "0" in column 2						TO	TAL	544	OR	TOTAL	
CLAIMS AS AMENDED - PART II				(Column 3)	SMALL ENTITY OR SMALL ENTI				1		
		(Column 1)	2 5 Co.	(Column 2)	(Column 3)						
¥		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	R A	TE	ADDI- TIONAL		RATE	ADDI- TIONAL
Ž		AFTER		PREVIOUSLY	EXTRA	1		FEE		KAIL	FEE
AMENDMENHA	Total	AMENDMENT	Military Commence	PAID FOR		<b> </b>			OR		
Z	(37 CFR 1.16(c))		Minus		=	x \$_			OR	x \$=	
¥	Independent (37 CFR 1.16(b))	*	Minus	***	=	x _	=		OR	x=	
iii V	FIRST PRES	ENTATION OF N	ULTIPLE DEI	PENDENT CLAIM	(37 CFR 1.16(d))	+	=	:	OR	+ =	
jenig F							TAL		OR	TOTAL	
H		(Column 1)	NG COLUMN TO THE SAME OF THE S	(Column 2)	(Column 3)	ADDIT.	FEE	<u> </u>	A	DDIT. FEE	
B		CLAIMS		HIGHEST	22222			ADDI-			ADDI-
T-		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	R.A	ATE	TIONAL FEE		RATE	TIONAL FEE
Œ		AMENDMEN	r i si	PAID FOR		╙		11,1			TEE
Á	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$_	=		OR	x \$=	
AMENDMENT	Independent	*	Minus	***	=	x	500		OR	x =	
A	(37 CFR 1.16(b))		AN TUDI E DEL	DENDENIE OF A D.C.	(22 CFD 1 1(/4))				OR		
	FIRST PRES	SENTATION OF F	WIOLTIPLE DE	PENDENT CLAIM	(37 CFR 1 16(d))	] [	—= OTAL		OR	+= TOTAL	
		(Column 1)		(Column 2)	(Column 3)	ADDIT			OR A	DDIT. FEE	
		CLAIMS		HIGHEST		$I \sqcap$		ADDI-			ADDI-
I C		REMAINING		NUMBER	PRESENT	R.	ATE	TIONAL		RATE	TIONAL
Ä		AFTER AMENDMEN	Г	PREVIOUSLY PAID FOR	EXTRA			FEE			FEE
AMENDMENT C	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$_	=		OR	x \$=	
MEN	Independent (37 CFR 1.16(b))	*	Minus	***	=	x		:	OR OR	x=	
4		ENTATION OF	MILTIPLE DE	PENDENT CLAIM	(37 CFR 1.16(d))	1 📘		_	1	+ -	
<u> </u>	FIRST FRES	LIVIATION OF	TODIN DE DE	LIDDIN CDAIN	(2. 22. 21.0(4))	J <u>├</u>		·	OR	TOTAL	
* I	f the entry in colu	mn I is less than t	he entry in colu	nn 2, write "0" in colu	mn 3.	ADDI	TOTAI		OR A	TOTAL ADDIT. FEE	
				S SPACE is less than S SPACE is less than 3							

## FORM FOR FIRST CLASS MAIL CERTIFICATION ACCOMPANYING PAPER AND/OR FEE

## In the United States Patent and Trademark Office

In re Application of: Elkan

Filed: herewith Serial No.: tba

For: Method and System for Selecting Documents by Measuring Document Quality

Docket No.: 117-001

Assistant Commissioner for Patents Initial Patent Examination Division Washington, D.C. 20231

Date of Deposit: November 1, 2001

I hereby certify that the Check in the amount of \$544, Declaration and Power of Attorney, Patent Application Fee Determination Record, Information Disclosure Statement, Form PTO/SB/08A, Specification (24 pages), drawings (9 pages), Fee Transmittal Form PTO/SB/17, Utility Patent Application Transmittal Form PTO/SB/05, and a self addressed postcard are being deposited with the United States Postal Service on the date indicated above and is addressed to the Assistant Commissioner for Patents, Initial Patent Examination Division, Washington, D.C. 20231.

Respectfully submitted,

Jennifer Meredith 212-662-1022